

POSITION	ID NO.	DATE
CLASSIFIER	34	3/13/96
EXAMINER	Moy	3/13/96
TYPIST	323	10 16
VERIFIER		
CORPS CORR.		
SPEC. HAND	440	10-16-96
FILE MAINT.	570	4-2-96
DRAFTING		

## INDEX OF CLAIMS

Claim	Date
Final	
Original	
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SYMBOLS

- Rejected
- Allowed
- (Through number) Canceled
- Restricted
- Withdrawn
- Interference
- Appeal
- Objected

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